



Department of the Army
Mobile Retention Training Team
Training Aid

SERVICE COMPUTATION



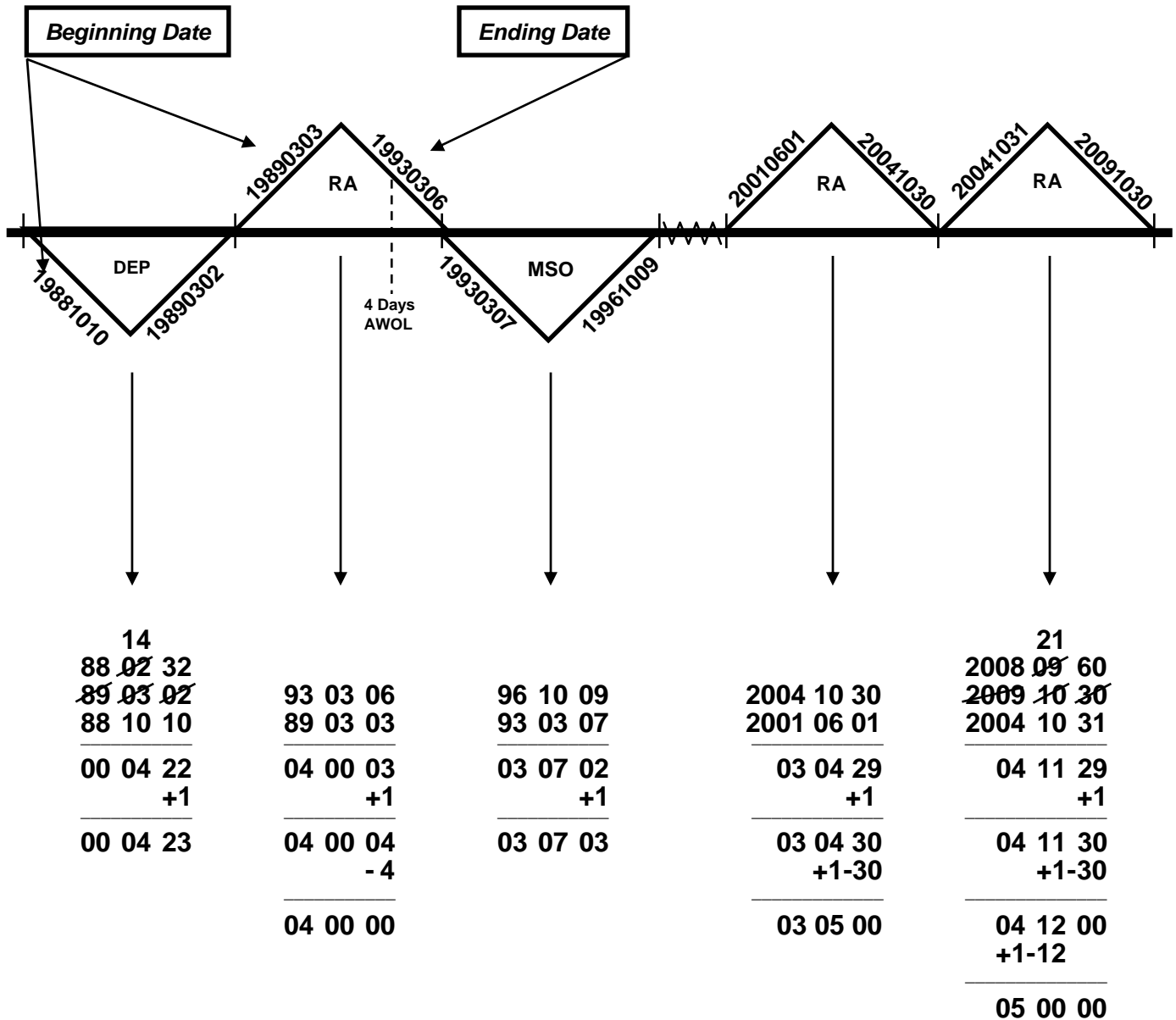
January 2007

Recruiting and Retention School
Soldier Support Institute
Fort Jackson, South Carolina



Service Computation

CASE NAME: SSG SUNGER



[illegible]

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY									
1. NAME (Last, First, Middle) SUNGER, JOHN EDWARD			2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA			3. SOCIAL SECURITY NO 400 00 0004			
4a. GRADE, RATE OR RANK SGT		4b. PAY GRADE E5		5. DATE OF BIRTH (YYMMDD) 700804		6. RESERVE OBLIG. TERM. DATE Year 96 Month 10 Day 09			
7a. PLACE OF ENTRY INTO ACTIVE DUTY SAN DIEGO, CALIFORNIA				7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 36 EASTERN AVE SAN DIEGO, CA 92126					
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND HHC, 6TH CAV BDE FORSCOM FC				8.b. STATION WHERE SEPARATED FT HOOD, TX					
9. COMMAND TO WHICH TRANSFERED USAR CONTROL GROUP (REINF) RCPAC, ST LOUIS, MO 63132						10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ 50,000			
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) 71L, ADMINISTRATIVE SPECIALIST 3 YEARS AND 08 MONTHS				12. RECORDS OF SERVICE		Year(s)	Month(s)	Day(s)	
				a. Date Entered AD This Period		89	03	03	
				b. Separation Date This Period		93	03	06	
				c. Net Active Service This Period		04	00	00	
				d. Total Prior Active Service		00	00	00	
				e. Total Prior Inactive Service		00	04	23	
				f. Foreign Service		02	00	00	
				g. Sea Service		00	00	00	
				h. Effective Date of Pay Grade		92	10	01	
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) ARMY SERVICE RIBBON, OVERSEAS SERVICE RIBBON, GOOD CONDUCT MEDAL, NONCOMMISSIONED OFFICER PROFESSIONAL DEVELOPEMENT									
14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) PLDC									
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATION ASSISTANCE PROGRAM		Yes	No	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT		Yes	No	16. DAYS ACCRUED LEAVE PAID NONE	
			X			X			
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
18. REMARKS									
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 9001 CORTE POZOS SPRING VALLEY, CA 92077				19.b. NEAREST RELATIVE (Name and address - include Zip Code) LEANN SUNGER 36 EASTERN AVE SAN DIEGO, CA 92126					
20. MEMBER REQUESTS COPY 6 BE SENT TO <u>CA</u> DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
21. SIGNATURE OF MEMBER BEING SEPARATED John Edward Sunger				22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) Emanuel J. Gonzales EMANUEL J. GONZALES, CPT, AG					
SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)									
23. TYPE OF SEPARATION Relief From Active Duty				24. CHARACTER OF SERVICE (Include upgrades) Honorable					
25. SEPARATION AUTHORITY AR 635-200, Chapter 4				26. SEPARATION CODE		27. REENTRY CODE			
28. NARRATIVE REASON FOR SEPARATION Expiration Term of Service									
29. DATES OF LOST TIME DURING THIS PERIOD 900206-900209						30. MEMBER REQUESTS COPY 4 JES Initials			

ENLISTMENT/REENLISTMENT DOCUMENT

ARMED FORCES OF THE UNITED STATES

PRIVACY ACT STATEMENT

AUTHORITY: 5 USC 3331, 32 USC 708, 44 USC 708 and 3101; 10 USC 133, 265, 275, 504, 508, 510, 591, 672(d), 678, 837, 1007, 1071 through 1087, 1168, 1169, 1475 through 1480, 1553, 2107, 2122, 3012, 5031, 8012, 8033, 8496, and 9411; 14 USC 351 and 632, and Executive Orders 9397, November 1943 (SSN).

PRINCIPAL PURPOSES: To record enlistment or reenlistment into the U. S. Armed Forces. This information becomes a part of the subject's military personnel records which are used to document promotion, reassignment, training, medical support, and other personnel management actions. The purpose of soliciting the SSN is for positive identification.

ROUTINE USES: This form becomes a part of the Service's Enlisted Master File and Field Personnel File. All uses of the form are internal to the relevant Service.

DISCLOSURE: Voluntary; however, failure to furnish personal identification information may negate the enlistment/reenlistment application.

A. ENLISTEE / REENLISTEE IDENTIFICATION DATA

1. NAME (Last, First, Middle) <p style="text-align: center;">SUNGER JOHN EDWARD</p>		2. SOCIAL SECURITY NUMBER <p style="text-align: center;">400-00-0004</p>		
3. HOME OF RECORD (Street, City, State, ZIP Code) <p style="text-align: center;">9011 CORTE POZOS SPRING VALLEY, CA 92077</p>		4. PLACE OF ENLISTMENT/REENLISTMENT (Mil. Installation, City, State) <p style="text-align: center;">MEPS, SAN DIEGO, CA 92126</p>		
5. DATE OF ENLISTMENT/REENLISTMENT (YYMMDD) <p style="text-align: center;">2001 JUN 01</p>	6. DATE OF BIRTH (YYMMDD) <p style="text-align: center;">1970 AUG 04</p>	7. PREV MIL SVC UPON ENL/REENLIST a. Total Active Military Service b. Total Inactive Military Service	YEARS 04 03	MONTHS 00 11
			DAYS 00 26	

B. AGREEMENTS

8. I am enlisting/reenlisting in the United States (*list branch of service*) ARMY.
 this date for 4 years and _____
 weeks beginning in pay grade E2. The additional details of my enlistment/
 reenlistment are in Section C and Annex(es) A, B.

a. FOR ENLISTMENT IN A DELAYED ENTRY/ENLISTMENT PROGRAM (DEP):

I understand that I will be ordered to active duty as a Reservist unless I report to the place shown in item 4 above by (*list date (YYMMDD)*) _____ for enlistment in the Regular component of the United States (*list branch of service*) _____ for not less than _____ years and weeks. My enlistment in the DEP is in a nonpay status. I understand my period of time in the DEP is **NOT** creditable for pay purposes upon entry into a pay status. However, I also understand that this time is counted toward fulfillment of my military service obligation or commitment. I must maintain my current qualifications and keep my recruiter informed of any changes in my physical or dependency status, moral qualifications, and mailing address.

b. Remarks: (*if none, so state.*)

NONE

c. The agreements in this section and attached annex(es) are all the promises made to me by the Government.

ANYTHING ELSE ANYONE HAS PROMISED ME IS NOT VALID AND WILL NOT BE HONORED.

(Initials of Enlistee/Reenlistee) YES

(Continued on reverse side.)

NAME OF ENLISTEE/REENLISTEE (<i>Last, First, Middle</i>) SUNGER JOHN EDWARD	SOCIAL SECURITY NO. OF ENLISTEE/REENLISTEE 400-00-0004	
D. CERTIFICATION AND ACCEPTANCE		
<p>13a. My acceptance for enlistment is based on the information I have given in my application for enlistment. If any of that information is false or incorrect, this enlistment may be voided or terminated administratively by the Government or I may be tried by a Federal, civilian, or military court and, if found guilty, may be punished.</p> <p>I CERTIFY THAT I HAVE CAREFULLY READ THIS DOCUMENT. ANY QUESTIONS I HAD WERE EXPLAINED TO MY SATISFACTION. I FULLY UNDERSTAND THAT ONLY THOSE AGREEMENTS IN SECTION B OF THIS DOCUMENT OR RECORDED ON THE ATTACHED ANNEX(ES) WILL BE HONORED. ANY OTHER PROMISES OR GUARANTEES MADE TO ME BY ANYONE ARE WRITTEN BELOW: (If none, X "NONE" and initial.) <input checked="" type="checkbox"/> NONE <u>YES</u> (Initials of enlistee/reenlistee)</p>		
b. SIGNATURE OF ENLISTEE/REENLISTEE <i>John Edward Sunger</i>	c. DATE SIGNED (YYMMDD) 2001 JUN 01	
<p>14. SERVICE REPRESENTATIVE CERTIFICATION</p> <p>a. On behalf of the United States (<i>list branch of service</i>) <u>ARMY</u>, I accept this applicant for enlistment. I have witnessed the signature in item 13b to this document. I certify that I have explained that only those agreements in Section B of this form and the attached Annex(es) will be honored, and any other promises made by any person are not effective and will not be honored.</p>		
b. NAME (<i>Last, First, Middle</i>) NERO, GORDON	c. PAY GRADE E7	d. UNIT/COMMAND NAME MEPS
e. SIGNATURE <i>Gordon Nero</i>	f. DATE SIGNED (YYMMDD) 2001 JUN 01	g. UNIT/COMMAND ADDRESS (<i>City, State, ZIP Code</i>) SAN DIEGO, CA 92126
E. CONFIRMATION OF ENLISTMENT OR REENLISTMENT		
<p>15. IN THE ARMED FORCES EXCEPT THE NATIONAL GUARD (ARMY OR AIR): I, <u>JOHN EDWARD SUNGER</u>, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to regulations and the Uniform Code of Military Justice. So help me God.</p>		
<p>16. IN THE NATIONAL GUARD (ARMY OR AIR): I, _____, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the State of _____ against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the Governor of _____, and the orders of the officers appointed over me, according to law and regulations. So help me God.</p>		
<p>17. IN THE NATIONAL GUARD (ARMY OR AIR): I do hereby acknowledge to have voluntarily enlisted/reenlisted this _____ day of _____, 19 _____ in the _____ National Guard and as a Reserve of the United States (<i>list branch of service</i>) _____ with membership in the National Guard of the United States for a period of _____ years, _____ months, days, under the conditions prescribe by law, unless sooner discharged by proper authority.</p>		
18a. SIGNATURE OF ENLISTEE/REENLISTEE <i>John Edward Sunger</i>	b. DATE SIGNED (YYMMDD) 2001 JUN 01	
<p>19. ENLISTMENT / REENLISTMENT OFFICER CERTIFICATION</p> <p>a. The above oath was administered, subscribed, and duly sworn to (or affirmed) before me this date</p>		
b. NAME (<i>Last, First, Middle</i>) SNIDE, UPTON L.	c. PAY GRADE O4	d. UNIT/COMMAND NAME MEPS
e. SIGNATURE <i>Upton L. Snide</i>	f. DATE SIGNED (YYMMDD) 2001 JUN 01	g. UNIT/COMMAND ADDRESS (<i>City, State, ZIP Code</i>) SAN DIEGO, CA 92126

ENLISTMENT/REENLISTMENT DOCUMENT

ARMED FORCES OF THE UNITED STATES

PRIVACY ACT STATEMENT

AUTHORITY: 5 USC 3331, 32 USC 708, 44 USC 708 and 3101; 10 USC 133, 265, 275, 504, 508, 510, 591, 672(d), 678, 837, 1007, 1071 through 1087, 1168, 1169, 1475 through 1480, 1553, 2107, 2122, 3012, 5031, 8012, 8033, 8496, and 9411; 14 USC 351 and 632, and Executive Orders 9397, November 1943 (SSN).

PRINCIPAL PURPOSES: To record enlistment or reenlistment into the U. S. Armed Forces. This information becomes a part of the subject's military personnel records which are used to document promotion, reassignment, training, medical support, and other personnel management actions. The purpose of soliciting the SSN is for positive identification.

ROUTINE USES: This form becomes a part of the Service's Enlisted Master File and Field Personnel File. All uses of the form are internal to the relevant Service.

DISCLOSURE: Voluntary; however, failure to furnish personal identification information may negate the enlistment/reenlistment application.

A. ENLISTEE / REENLISTEE IDENTIFICATION DATA

1. NAME (Last, First, Middle) <p style="text-align: center;">SUNGER JOHN EDWARD</p>		2. SOCIAL SECURITY NUMBER <p style="text-align: center;">400-00-0004</p>																	
3. HOME OF RECORD (Street, City, State, ZIP Code) <p style="text-align: center;">9011 CORTE POZOS SPRING VALLEY, CA 92077</p>		4. PLACE OF ENLISTMENT/REENLISTMENT (Mil. Installation, City, State) <p style="text-align: center;">HHC, 4TH INF DIV FT CARSON, CO 80913</p>																	
5. DATE OF ENLISTMENT/REENLISTMENT (YYMMDD) <p style="text-align: center;">2004 OCT 31</p>	6. DATE OF BIRTH (YYMMDD) <p style="text-align: center;">1970 AUG 04</p>	7. PREV MIL SVC UPON ENL/REENLIST <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 60%;">a. Total Active Military Service</th> <th style="width: 10%;">YEARS</th> <th style="width: 10%;">MONTHS</th> <th style="width: 20%;">DAYS</th> </tr> <tr> <td style="text-align: center;">07</td> <td style="text-align: center;">05</td> <td style="text-align: center;">00</td> <td></td> </tr> <tr> <th style="width: 60%;">b. Total Inactive Military Service</th> <th style="width: 10%;">YEARS</th> <th style="width: 10%;">MONTHS</th> <th style="width: 20%;">DAYS</th> </tr> <tr> <td style="text-align: center;">03</td> <td style="text-align: center;">11</td> <td style="text-align: center;">26</td> <td></td> </tr> </table>	a. Total Active Military Service	YEARS	MONTHS	DAYS	07	05	00		b. Total Inactive Military Service	YEARS	MONTHS	DAYS	03	11	26		
a. Total Active Military Service	YEARS	MONTHS	DAYS																
07	05	00																	
b. Total Inactive Military Service	YEARS	MONTHS	DAYS																
03	11	26																	

B. AGREEMENTS

8. I am enlisting/reenlisting in the United States (*list branch of service*) **ARMY**.
 this date for **5** years and
 weeks beginning in pay grade **E6**. The additional details of my enlistment/
 reenlistment are in Section C and Annex(es) **A, B**.

a. FOR ENLISTMENT IN A DELAYED ENTRY/ENLISTMENT PROGRAM (DEP):

I understand that I will be ordered to active duty as a Reservist unless I report to the place shown in item 4 above by (*list date (YYMMDD)*) _____ for enlistment in the Regular component of the United States (*list branch of service*) _____ for not less than _____ years and weeks. My enlistment in the DEP is in a nonpay status. I understand my period of time in the DEP is **NOT** creditable for pay purposes upon entry into a pay status. However, I also understand that this time is counted toward fulfillment of my military service obligation or commitment. I must maintain my current qualifications and keep my recruiter informed of any changes in my physical or dependency status, moral qualifications, and mailing address.

b. Remarks: (*if none, so state.*)

- (1) **REGULAR ARMY REENLISTMENT OPTION (A000) RCN: 0936751.**
- (2) **NO BONUS ENTITLEMENT.**
- (3) **NO WAIVER.**
- (4) **2D REENLISTMENT.**

c. The agreements in this section and attached annex(es) are all the promises made to me by the Government.
ANYTHING ELSE ANYONE HAS PROMISED ME IS NOT VALID AND WILL NOT BE HONORED.

(Initials of Enlistee/Reenlistee) **JES**

(Continued on reverse side.)

NAME OF ENLISTEE/REENLISTEE (<i>Last, First, Middle</i>) SUNGER JOHN EDWARD	SOCIAL SECURITY NO. OF ENLISTEE/REENLISTEE 400-00-0004	
D. CERTIFICATION AND ACCEPTANCE		
<p>13a. My acceptance for enlistment is based on the information I have given in my application for enlistment. If any of that information is false or incorrect, this enlistment may be voided or terminated administratively by the Government or I may be tried by a Federal, civilian, or military court and, if found guilty, may be punished.</p> <p>I CERTIFY THAT I HAVE CAREFULLY READ THIS DOCUMENT. ANY QUESTIONS I HAD WERE EXPLAINED TO MY SATISFACTION. I FULLY UNDERSTAND THAT ONLY THOSE AGREEMENTS IN SECTION B OF THIS DOCUMENT OR RECORDED ON THE ATTACHED ANNEX(ES) WILL BE HONORED. ANY OTHER PROMISES OR GUARANTEES MADE TO ME BY ANYONE ARE WRITTEN BELOW: (If none, X "NONE" and initial.) <input checked="" type="checkbox"/> NONE <u>YES</u> (Initials of enlistee/reenlistee)</p>		
b. SIGNATURE OF ENLISTEE/REENLISTEE <i>John Edward Sunger</i>	c. DATE SIGNED (YYMMDD) 2004 OCT 31	
<p>14. SERVICE REPRESENTATIVE CERTIFICATION</p> <p>a. On behalf of the United States (<i>list branch of service</i>) <u>ARMY</u>, I accept this applicant for enlistment. I have witnessed the signature in item 13b to this document. I certify that I have explained that only those agreements in Section B of this form and the attached Annex(es) will be honored, and any other promises made by any person are not effective and will not be honored.</p>		
b. NAME (<i>Last, First, Middle</i>) WATSON, ELIZABETH F.	c. PAY GRADE E7	d. UNIT/COMMAND NAME HHC, 4TH INF DIV
e. SIGNATURE <i>Elizabeth F. Watson</i>	f. DATE SIGNED (YYMMDD) 2004 OCT 31	g. UNIT/COMMAND ADDRESS (<i>City, State, ZIP Code</i>) FT CARSON, CO 80913
E. CONFIRMATION OF ENLISTMENT OR REENLISTMENT		
<p>15. IN THE ARMED FORCES EXCEPT THE NATIONAL GUARD (ARMY OR AIR): I, <u>JOHN EDWARD SUNGER</u>, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to regulations and the Uniform Code of Military Justice. So help me God.</p>		
<p>16. IN THE NATIONAL GUARD (ARMY OR AIR): I, _____, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the State of _____ against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the Governor of _____, and the orders of the officers appointed over me, according to law and regulations. So help me God.</p>		
<p>17. IN THE NATIONAL GUARD (ARMY OR AIR): I do hereby acknowledge to have voluntarily enlisted/reenlisted this _____ day of _____, 19 _____ in the _____ National Guard and as a Reserve of the United States (<i>list branch of service</i>) _____ with membership in the National Guard of the United States for a period of _____ years, _____ months, days, under the conditions prescribe by law, unless sooner discharged by proper authority.</p>		
18a. SIGNATURE OF ENLISTEE/REENLISTEE <i>John Edward Sunger</i>	b. DATE SIGNED (YYMMDD) 2004 OCT 31	
<p>19. ENLISTMENT / REENLISTMENT OFFICER CERTIFICATION</p> <p>a. The above oath was administered, subscribed, and duly sworn to (or affirmed) before me this date</p>		
b. NAME (<i>Last, First, Middle</i>) WILLIAMS, RONALD	c. PAY GRADE O-4	d. UNIT/COMMAND NAME HHC, 4TH INF DIV
e. SIGNATURE <i>Ronald Williams</i>	f. DATE SIGNED (YYMMDD) 2004 OCT 31	g. UNIT/COMMAND ADDRESS (<i>City, State, ZIP Code</i>) FT CARSON, CO 80913

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Practical Exercise

1. 2002 01 26
1999 01 26

2. 1992 11 30
1988 10 25

3. 1981 10 31
1977 10 10

4. 2002 11 30
1992 08 15

5. 2010 09 30
2007 05 31

6. 1993 02 28
1991 03 01

7. 1994 02 28
1992 11 30

8. 2003 06 01
1978 07 31

9. 2004 11 05
1994 11 08

10. 2000 02 28
1978 01 31

11. 1995 08 13
1988 10 20

12. 1995 02 28
1991 12 01

Practical Exercise

**13. 2009 11 14
1985 06 10**

**14. 1995 08 13
1985 04 02**

**15. 2005 07 31
1999 01 25**

**16. 1995 12 03
1991 12 02**

**17. 1995 02 25
1978 03 15**

**18. 1990 04 20
1984 04 21**

**19. 1997 01 29
1985 03 21**

**20. 1996 02 28
1984 04 24**

**21. 1994 04 01
1986 11 25**
